## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUL FEE

Mail Stop ISSUL FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notifications.						
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						or domestic mailings of the for any other accompanying ent or formal drawing, must
22442	7590 03/19	9/2007		5 · 1 · .	/	
SHERIDAN ROSS PC 1560 BROADWAY SUITE 1200 DENVER, CO 80202				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
22111 211, 00 00202				Brend.	a Carpinter	(Depositor's name)
				Bunda	Carpents	27 (Signature)
£:				6/	18/07	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/848,929 05/18/2004			Ray Winston Freeman JR		1029-358-CIP	5694
TITLE OF INVENTION: EDGEWISE ORTHODONTIC BRACKET WITH CHARACTER BASE						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	06/19/2007
EXAMI	NER	ART UNIT	CLASS-SUBCLASS			
O'CONNOR, CARY E 3732			433-009000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys						
Change of corresponderess form PTO/SB	ndence address (or Cha /122) attached.	nge of Correspondence	or agents OR, alternatively,			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Rmo, Fac.			Denver, Colorado			
Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 💢 Corporation or other private group entity 🔲 Government						
4a. The following fee(s) are submitted:			b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)			
Publication Fee (No small entity discount permitted)			A check is enclosed.			
Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 19.19.10 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above)						
a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27.						FR 1.27(g)(2).
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.						
Authorized Signature _	/Joseph E.	Kovarik/	Date_ June 18, 2007			
Typed or printed name Joseph E. Kovarik			Registration No. 33,005			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						